EASINGTON RURAL DISTRICT



REPORT OF THE MEDICAL OFFICER OF HEALTH

For the Year Ending 31st December, 1945



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Vice-Chairman—

COUNCILLOR THOMAS LAING.

Councillors :—

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, ,	J. Barker	, ,	W. Luke
,,	G. Barnes	, ,	M. Mann
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, ,	J. Burnip	,,	J. Moore, J.P.
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Cleansing Superintendent--W. Angus, M.Inst.P.C.

Water Superintendent -R. Blakey.

Thorpe Infectious Diseases Hospital Medical Superintendent: E. F. Dawson-Walker, M.D., B.S., B.Hy., D.P.H.

Matron—Mrs. G. Harrop (Resigned November, 1945). Miss D. Green (Appointed December, 1945).

EASINGTON RURAL DISTRICT.

REPORT

OF THE

Medical Officer of Health

FOR THE

Year ended 31st December, 1945.

Easington,

Co. Durham,

1946.

Mr. Chairman, Councillor Mrs. Winter, and Gentlemen,

I have pleasure in submitting to you the Annual Report on the health and sanitary consitions of your district for the year 1945.

On March 26th of that year I commenced duty as your Medical Officer of Health in succession to Dr. W. V. MacFarlane, and for three-quarters of the year the department has been under my control.

A detailed account of the activities of the department is given in the various sections of this report, much of it in tabular form. The final section, which relates to the work of the Sanitary Inspectors' Department, has been contributed by the Senior Sanitary Inspector.

In this letter the contents of the report will be briefly summarised and comment made where necessary.

Vital Statistics—Birth Rate.

The figure of 21.1 per 1,000 of the population for the birth rate shows a slight decline from that for 1944, namely 22.2. After dropping to the low level of 18.7 in 1940 the rate rose steadily until it reached the figure mentioned in 1944.

Compared with the rate for England and Wales as a whole (16.1) and the 148 smaller towns (19.2), the district has a relatively high degree of fertility.

Maternal Mortality.

It is highly gratifying to record that the maternal mortality rate for the district was nil, as compared with the national rate of 1.46.

Many factors may have contributed to this satisfactory state of affairs. From the beginning of the century until 1935, the mortality from pregnancy and child bearing in the country as a whole remained almost stationary at four deaths per thousand births, but by 1943 it had fallen to half the 1935 rate.

The discovery and use of the sulphonamide group of drugs, and more latterly of penicillin, have undoubtedly contributed in a large measure to this result, together with the more frequent use of blood and plasma transfusions.

Much credit must also be given to the medical practitioners and midwives practising in the area, whose work is often carried out in difficult circumstances.

While the absence of any maternal death is a matter for congratulation it would be unwise to be too complacent. Twelve cases of purperal pyrexia were notified during the year, and the higher birth rate is causing difficulties due to the shortage of midwives, and to the very inadequate number of maternity beds available.

This latter shortage is no new problem, but has been rendered more acute in recent years owing to the housing shortage. There would appear to be a growing wish among women to be delivered in institutions even when this is not necessary on medical grounds. Whether this attitude will persist when the housing shortage is eased, and reasonable home facilities are available to all, is difficult to say.

As to the present inadequacy of the number of maternity beds available for the population of the district there can be no two opinions.

Infantile Mortality.

The death rate for all infants under one year of age per 1,000 live births was 54.08. The figure shows a decline from 59.76 in 1944, but still contrasts unfavourably with the figure for England and Wales as a whole, which was 46 in both 1944 and 1945.

Of 88 deaths of infants under one year of age 42, or 47.7 per cent. occurred in the first month of life, giving a neo-natal mortality rate of 25.8 per 1,000 live births. Of these 42 deaths 16 were certified as due to prematurity.

The infantile mortality rate as been described as probably the best index available as to the social circumstances of an area in that it tends to be high when housing is bad and overcrowding prevalent, and when knowledge of mothercraft is poor. It is gratifying to note that the figure of 54.08 is the lowest in the last decade, and moreover the lowest ever recorded for the area, but the fact that it is higher than the national rate by 18 per cent. indicates the urgent need for a speedy improvement in housing conditions and the lessening of overcrowding.

At the same time the figure, with the high level of deaths due to prematurity, constitutes a challenge to the maternity and child welfare authority for the area.

General Death Rate.

There is little to be said regarding the general death rate which at 11 per 1,000 of the population is a little above the figure for 1944, and is a fraction below the rate for the country as a whole, namely 11.4.

Individual Causes of Death.

Heart disease continued to head the list of causes of death, followed by cancer in the second place. This latter disease is closely followed by deaths due to disease of the arteries and veins of the brain, which in turn is followed by pneumonia and bronchitis. Deaths due to the diseases of early infancy and congenital malformations are just in excess of those due to tuberculosis (all forms). Table I gives a detailed statement of the causes of death under age groups.

Tuberculosis.

The statistics for this disease are set out and summarised in the section of the report dealing with it.

It should be noted that the mortality rate for the pulmonary form of the disease is below the national figure, but that for the non-pulmonary form is higher.

The death rate for this latter form of the disease has fallen rapidly in many urban areas as the proportion of pasteurised milk consumed has increased. It is possible that the solution of the problem in this area may be found along these lines.

Infectious Diseases.

The notifications of these diseases are set out in the report, and there is little on which to comment. The number of measles notifications showed a considerable increase on the previous year but the mortality was low. Both the incidence and mortality rate of diphtheria showed a welcome decline.

Thorpe Hospital.

Three new tables have been included to show more clearly the work carried out in this hospital during 1945.

It was a comparatively quiet year, the number of admissions being 45 below that for 1944, but much useful work was accomplished and a word of commendation is due to the staff for their steady and conscientious work.

In the latter months of the year steps were taken with a view to endeavouring to obtain for the hospital the status of an affiliated training school for fever nurses, but an account of these efforts belongs more properly to the report for 1946.

With the conclusion of the war it was possible to make a start with the purchase of much needed furniture and equipment.

Diphtheria Immunisation.

In the section of the report devoted to this subject the statistics are set out on the lines recently advocated by the Ministry of Health, and these show that steady progress has been maintained.

During the year a scheme was submitted to, and adopted by, the Council for the appointment of a fully qualified nurse who would offer, and if desired carry out, immunisation of children in their own homes, when the mother was unwilling or unable to bring them to their doctor's surgery. The circular issued by the Ministry of Health in January, 1946, placing the responsibility for the immunisation of all pre-school children upon the Child Welfare Authority, in this case the Durham County Council, caused the scheme to be suspended. The use of trained nurses, in most cases Health Visitors, for immunisation has been tried with marked success in two or three areas, although there has been strong opposition to the procedure from certain quarters.

The rise in the immunisation level in these areas is sufficient evidence of the success of such schemes, and it would appear

that the desired level of 75—80 per cent. of immunised children will be most likely to be obtained along such lines.

Scabies.

Details of the work carried out at the one remaining scables clinic are set out. The incidence of this disease is less than in the early war years, but in view of the virtual impossibility of treating patients for this troublesome complaint adequately in their own homes, this service will probably have to be continued. Steps are to be taken to centralise all treatment at the one clinic.

Housing.

A section on this subject, which has such an important bearing on the health and well-being of the area, has been contributed by the Engineer and Surveyor.

Water.

In the section dealing with the sanitary circumstances of the area detailed information regarding the water supply of the district is given.

The quality of the piped supply is good, but, as an additional safeguard, the number of samples taken for bacteriological examination has been increased in 1946.

Samples are also to be taken from the houses without mains supply.

Conclusion.

The foregoing is a brief summary of the work of the Health Department in the eventful year of 1945, which saw the end of the war and the beginnings of a gradual return to peace time working. By the time this report is in print it is probable that the new Health Bill will have become law, with all the many changes which must be consequent thereon, and it is unlikely that there will be more than two further annual reports to this Council in their present format.

In closing I wish to express to the Council my appreciation of their continued support, and extend to the staff, and to the Senior Sanitary Inspector in particular, my grateful thanks for their help and willing co-operation throughout the year.

I am, Mr. Chairman, Mrs. Winter and Gentlemen,

Your obedient servant,

E. F. DAWSON-WALKER, Medical Officer of Health.

SECTION I.

CONDITIONS OF THE AREA

Area (in acres)		• • •	• • •	34,653
Registrar General's e mid. 1945		lent populat		76,990
			• • •	10,000
Number of Inhabited according to t	d Houses on 31s the Rate Books		1945	21,012
Rateable Value (at 1	st April 1945)	• • •		£301,433
Sum represented by	Penny Rate (1	944-5)	• • •	£1,112
	VVM A V CM A M	J.C.T.L.C.C		
	VITAL STAT	TSTICS.		
Births :- Live Births	5.			
Legitimate Illegitimate	Male 774 46	Female 771 36		Total 1545 82
thegroniate				The second secon
	820	807		1627
Birth Rate per population	1,000 of the est	imated reside 	ent 	21.13
Stillbirths—				
Legitimate	24	19		43
Illegitimate	1	en.		1
	25	19		44
Rate per 1,000 t	total births	• • •	• • •	27.04
Infantile Mortality—				
Deaths of infan	ts under 1 yea	r :		
Legitimate	45	$\frac{37}{2}$		82
Illegitimate	3	.3		6
	48	40		88

INFANTILE MORTALITY RATES.

Death rate of all infants under one year per 1000 live births, 54.08.

Death rate of legitimate infants under one year per 1000 legitimate live births, 53.07.

Death rate of illegitimate infants under one year per 1000 illegitimate live births, 73.17.

	Total	Male	Fema	ale
DEATHS-	848	466	3	82
	Rate per 1,000 of dent population	the estimate 	d	11.01
MATERNAL DE	ATHS			
Deaths	from Puerperal C from Sepsis from Other Caus			Nil Nil Nil
Materna	ul Mortality Rate			Nil

172 dn 94 66 to 75 217 46 to 65 221 26 to 45 6.7 16 to 25 34 6 to 15 $\frac{\infty}{2}$ 2 က ပြု to 2 Under $\infty \\ \infty$ 115 207 10 10 45 13 848 All Ages Other Diseases of Circulatory System Ulcer of Stomach & Duodenum Intracranial Vascular Lesions Other Tuberculosis Diseases Other Respiratory Diseases Diarrhoea (under 2 years) Tuberculosis Respiratory Cerebro-Spinal Fever ... Other Digestive Diseases Road Traffic Accidents Totals Other Violent Causes Congenital Debility Syphilitic Diseases Premature Births Whooping Cough All Other Causes Scarlet Fever Appendicitis Heart Disease Poliomyelitis Encephalitis Pneumonia Diphtheria Bronchitis Influenza Nephritis Diabetes Measles Suicide Cancer

AT DEATH.

AGES

DEATHS-CAUSES AND

TABLE 1.

TABLE 2.

Cancer

The following table gives the deaths from Cancer, in age groups, and the localisation of the disease.

				A	ges in Y	ears		
			[26	46	66	76	Totals
			to	to	to	to	up	
			26	45	65	75		
				1			-	
Stomach .				4	17	12		33
Breast .			-	1	5	4	1	11
Prostate .					***	:3		3
Uterus .			to Strong	2	5	2		9
Liver .					:3	3		6
Lungs .	• •		1	3	:3	1		8
Damala					4	6	3	13
Other Causes		• • •	1	4	7	15	5	32
			2	14	44	46	9	115

TABLE 3.

Table of Birth and Death Rates for the Past 10 Years

Year	General Death Rate	Infantile Death Rate	Birth Rate
1936	11.8	86.1	20.5
1937	11.2	69.5	20.3
1938	11.5	62.3	20.0
1939	11.4	81.2	18.9
1940	11.2	62.5	18.7
1941	11.6	73.4	19.7
1942	10.8	58.0	19.8
1943	11.3	75.3	20.6
1944	10.6	59.7	22.2
1945	11.0	54.1	21.1

	General	Infantile	
194.5	Death Rate	Death Rate	Birth Rate
England & Wales	11.4	46.0	16.1
Easington Rural District	11.0	54.1	21.1

TABLE 4.

Birth Rate, Death Rate and Analysis of Mortality during the Year, 1945.

	Rat 1,000 popu	Rate per 1,000 Total population	Aı	ากแลไ	Annual Death Rate per 1.000 Population	Rate	per l	.000 д	opulati	по		o C
	sifriid svid	siltridllits	səsna) [[A	bns biodqyT biodqytsrsq sreveY	Smallpox	Measles	Searlet Fever	oʻʻ guiqootlW	sirolalqid	ьхиэиНлТ	ыя кэоцтивід	Enteritis (und 2 years)
England and Wales	16.1	0.46	4.11	0.00	0.00	0.05	0.00	0.05	0.05	0.08	5.6	
Easington Rural District	21.1	0.57	11.0	0.00	0.00	0.03	0.01	0.03	0.04	0.05	4.3	

TABLE 5.

Infantile Mortality Rates
(10 years)

Year	Births	Easington R. D. Inf. Mortality Rate	England & Wales Inf. Mortality Rate
1936	1800	86.1	59
1937	1683	69.5	58
1938	1605	62.3	53
1939	1527	81.2	50
1940	1471	62.5	55
1941	1485	73.4	59
1942	1488	57.0	49
1943	1539	75.3	49
1944	1690	59.7	46
1945	1627	54.1	46

TABLE 6.
Death Rates (10 years)

Year	Deaths	Easington R. D. Death Rate	England & Wales Death Rate
1936	1085	11.8	12.1
1937	934	11.2	12.4
1938	925	11.5	11.6
1939	924	11.4	12.1
1940	885	11.2	14.3
1941	884	11.6	12.9
1942	808	10.8	11.6
1943	850	11.3	12.1
1944	811	10.6	11.6
1945	848	11.0	11.4

TABLE 7.
Natural Increase of Population

Year	Births	Deaths	Rate of Natural Increase per 1,000 population.
1936	1800	1085	8.6
1937	1683	934	9.3
1938	1605	925	8.4
1939	1527	924	7.5
1940	1471	885	7.4
1941	1485	884	7.8
1942	1488	808	8.4
1943	1539	850	9.2
1944	1690	811	11.5
1945	1627	848	10.1

SUMMARY OF STATISTICS 1945.

Population (estimated mid. 1945)	• • •	• • •	76,990
Areas (acres)		• • •	34,653
Estimated number of houses			21,012
Rateable value (at 1st April, 1945)			£301,433
Sum produced by 1d. rate (1944-5)			£1,112
Births	• • •		1,627
Birth rate per 1,000 of the estimated	resident	population	21.13
Deaths			848
Death rate per 1,000 of the estimated	l resident	population	10.11
Death rate of infants under one year	of age		54.1

Chief Causes of Death

Cause.	Num		ercentage of otal deaths.
Diseases of the heart	20		24.41
Cancer	11	5	13.56
Diseases of the veins and arteries.	11	3	13.33
Bronchitis and pneumonia	8	88	10.38
Diseases of early infancy, and con-	gen-		
ital malformations under 1 ye	ar 4	7	5.54
Tuberculosis (all forms) .	4	4	5.19
Tuberculosis (pulmonary)	3	5	4.13

Infectious Diseases.

Disease.	Cases notified.	Number of deaths.	Death rate per 1,000 population.
Scarlet Fever	122	B ANA AND AND AND AND AND AND AND AND AND	
Diphtheria	118	2	0.026
Enteric fever	3	gendo mag	
Erysipelas	18	· ·	
Cerebro-spinal fever	21	2	0.026
Measles	1313	2	0.026
Tuberculosis (all for	ms)111	44	0.571
· ·	(new cas	es)	

Influenza, which is not notifiable, caused 4 deaths.

SECTION II. TABLE 8. INFECTIOUS DISEASES NOTIFIED CASES, 1945.

				Cas	es notif	ied in v	Cases notified in whole district.	strict.					
	At	Under	_	દા	ಣ	4	ŗÇ	10	15	20	35	45	65
DISEASE	all	1	to	to	to	to	to	to	to	to	to	to	and
	ages		ુ દ	ಣ	4	<u>ت</u>	10	15	20	35	45	. 65	dn
Scarlet Fever	122		+	30	œ	6	59	29	1-		÷1		
Diphtheria	118	_	ಣ	**	6.	9	41	13	12	23	_		
Enteric Fever	ಣ	1			1			1		1	_	_	
Puerperal Pyrexia	12	1	1		1		1			10	લ		
Ophthalmia Neonatorum	र १	÷		1	1]						
Pneumonia	57	6.	ũ	_	?1	9	9		2	9	9	12	÷Ι
Erysipelas	18	1	[1		1		1		?	**	13	
Cerebro-spinal Fever	21		_	**	ಣ	ণা	ಣ	কা			,d		_
Anterior Poliomyelitis	_	_			1							1	
Measles	1313	7.2	175	198	188	200	163	11	ಣ	ಣ			
Whooping Cough	112	15	10	18	21	10	36	ભ					
Pulmonary Tuberculosis	58			_			_	_	133	24	G.	σ.	
Non-Pulmonary Tuberculosis	53	1	1	ũ	9	_	11	11	50	œ	ા	က	
TOTALS	1890	107	198	232	237	235	620	7.5	4.9	92	27	38	ಣ
				-									

The following table shows the number of cases notified and deaths recorded from Diphtheria and Scarlet Fever during the past five years:

TABLE 9.

	Diphth	eria	Scarlet F	ever
Year	Notifications	Deaths	Notifications	Deaths
1941	124	1.1	60	Nil
1942	309	9	170	Nil
1943	184	11	202	1
1944	131	7	126	1
1945	118	2	122	Nil

TABLE 10.

OPHTHALMIA NEONATORUM

1945

	CASES	
Notified	Trea	ted
Notified	At Home	In Hospital
2		2

TABLE 11.

GEOGRAPHICAL DISTRIBUTION OF DIPHTHERIA SHOWN IN AGE GROUPS

			7							-					
(4)			No	Com-	pletely	Immun-	ised	child	died	from	Dinh.	theria	during	1945	
m ng 1945		over 15					1					1		4	
(3) Deaths from Diphtheria during 1945	Ages in years	5—15	Granner de	1	_										-
Diphth	Ages	0-4		1	The second secon		!		1			Q			_
er of letely or to		over 15	1	1		1	1						1		
(2) Of (1) number of children completely immunised prior to admission.	in years	5-15	21	20	∞		1	কা		ଚୀ				_	20
Of child immu	Ages	04		_		-	1	∵ 1	1	I			9	_	5
issions tion 1945.		over 15	Т	70	1:2	ণ ।	-	6			3	1		ा	36
Diphtheria Admissions to Thorpe Isolation Hospital during 1945.	Ages in years	515	4	01	91			18	ତୀ	ಣ	4	ಣ	_		62
Diphth to The Hospita	Ages	0-4		ભ	4		 i	9		∵ 1	≎1		_	21	20
DISTRICT			BLACKHALL	EASINGTON	HORDEN	HAWTHORN	HUTTON HENRY	MURTON	SEATON	SHOTTON	SOUTH HETTON	THORNLEY	WHEATLEY HILL	WINGATE	Totals

TABLE 12.

CASES OF DIPHTHERIA NOTIFIED EACH MONTH DURING 1945

Dec. Total	1	8 118
Nov.		2
Oct.		
Sept.	31 10 - - -	10
Aug.		X
July.	- es es - w	G.
June		9
May.		∞
April		12
Mar.	4 1 9	11
Feb.	m m 1-	13
Jan.		10
Locality	Blackhall Easington Horden Hawthorn Hutton Henry Murton Seaton Shotton Shotton Thornley Wheatley Hill	Totals

INFECTIOUS DISEASES.

Scarlet fever notifications numbered 122 as compared with 126 in 1944 and 198 in 1943.

Diphtheria notifications decreased to 118, as contrasted with 131 in 1944 and 184 in 1943.

There was a marked rise in the number of cases of measles, 1313 being notified as against 379 in 1944 and 836 in 1943.

Cases of erysipelas numbered 18.

Twenty-one cases of cerebro-spinal meningitis were notified as against 14 and 9 in 1944 and 1943 respectively. As the notifications of this disease are in many cases tentative the figure of 5 proved cases admitted to Thorpe Isolation Hospital gives a truer index of the incidence of this disease in the district during the year.

There were 12 cases of puerperal pyrexia, in contrast with 8 in 1944 and 5 in 1943.

Notifications of pulmonary tuberculosis numbered 58, a decrease of 11 on the figure for 1944, and one below that for 1943.

SECTION III.

THORPE HOSPITAL.

308 patients were admitted to the hospital during the year as compared with 353 in 1944. Of these cases 80 were from the Seaham Urban District.

Table 13 shows the distribution of these cases under their corrected diagnosis according to the month of admission, and also shows the number of deaths due to the different diseases.

Table 14 sets out the final diagnoses under the same classification, while table 15 indicates the place of origin of the cases under the headings of the various parishes.

The death rates for the principle diseases treated were as follows:—

	1945	-ragistria radioni	ya Para - maddina na Milina -	And the second s	1944	
	Proved Cases	Deaths	0/0	Proved Cases	Deaths	%
Diphtheria	103	2	1.94	177	10	5.65
Scarlet Fever Cerebro-spinal	82			99		
Meningitis	5	2	40.00		?	?

There has again been a fall in the incidence of diphtheria together with a marked decrease in the case mortality figure.

The number of scarlet fever admissions shows no great difference from last year. The policy was continued of restricting admissions to cases which were ill enough to require skilled nursing, or where the home conditions were unsatisfactory due to overcrowding or some other reason. Cases from households which included an expectant mother or "food handler" were also admitted. The incidence of complications was small, probably owing to the fact that it has been possible to maintain adequate spacing between the patients.

As regards cerebro-spinal meningitis no comparison is possible with the figures for 1944 as these were uncorrected for final diagnosis. The incidence of this disease was low, but the case mortality figure of 40% was high. The two fatal cases were, however, aged two months and twelve months respectively. In infants, even with the advantages of the sulphonamide group of drugs, the prognosis is still uncertain,

TABLE 13

THORPE ISOLATION HOSPITAL

Admissions and Deaths, 1945.

						AD	MISSI	ONS											Ι	EATH	s					
DISEASE.	January	February	March	April	May	June	July	August	September	October	November	December	Totals	January	February	March	April	May	June	July	August	September	October	November	December	Totals
Scarlet Fever Diphtheria Diphtheria Carriers Enteric Group of Fevers Dysentery Measles Rubella Mumps Epidemic Cerebro Spinal Meningitis Other Forms of Meningitis Poliomyelitis Encephalitis Lethargica Pneumonia Bronchitis Influenza Other Respiratory Diseases Erysipelas Skin and Septic Conditions Puerperal Pyrexia Tonsillitis Other Gastro Intestinal Diseases General Diseases Injuries Vincents Angina Unclassified	1 — 7 — 1 — 2 1 — — 1 — — — — — — — — — — — —	5 13 1 — — — — — — — — — — — — — — — — —	8 14 — — — — — — — — — — — — — — — — — —	4 8 1 1 2 2 6 1	8 3 — — — — — — — — — — — — — — — — — —	5 7 — — — — — — — — — — — — — — — — — —	941	5 6 — — — — — — — — — — — — — — — — — —	6 13 — 1 — — — — — — — — — — — — — — — —	10 8 	7 8 	7 9 — — — — — — — — — — — — — — — — — —	82 103 3 1 2 10 4 3 5 7 3 — 11 2 1 1 5 4 4 5 4 6 2 1 5 2 1 5 2 1 5 2 1 5 2 1 5 2 1 5 2 1 5 2 1 5 2 1 5 2 1 5 2 1 5 2 1 5 2 1 5 2 1 5 2 2 2 2				1				1	1	1	- - - - - - - - - - - - - - - - - - -		
Totals	31	26	34	25	27	15	22	22	30	29	25	22	308	2	1	3	1	_	_	_	1	1	1	1	1	12



THORPE ISOLATION HOSPITAL

Diseases Admitted—1945.

PROVED TO BE:

SENT IN AS	Number	Scarlet Fever	Diphtheria	Diphtheria Carriers	Enteric Group of Fevers	Dysentery	Measles	Rubella	Mumps	Epidemic Cerebro Spinal Meningitis	Other forms of Meningitis	Poliomyelitis	EncephalitisLethargica	Pneumonia	Bronchitis	Influenza	Other Respiratory Diseases	Erysipelas	Skin and Septic Conditions	Puerperal Pyrexia	Tonsillitis	Other Gastro Intestinal Diseases	General Diseases	Injuries	Vincents Angina	Unclassified
Scarlet Fever Diphtheria Diphtheria Diphtheria Carriers Enterie Group of Fevers Dysentery Measles Rubella Mumps Epidemie Cerebro Spinal Meningitis Other Forms of Meningitis Poliomyelitis Encephalitis Lethargiea Pneumonia Bronehitis Influenza Other Respiratory Diseases Erysipelas Skin and Septic Conditions Puerperal Pyrexia Tonsillitis Other Gastro Intestinal Diseases General Diseases Injuries Vineents Angina Unelassified	147 5 3 2 10 -3 25 -3 1 4 -5 1 6 1 3 	77 5	1 100 2 	3	1	2	9	3	3	5				1 — — — — — — — — — — — — — — — — — — —	2		1	5	3	55	3 34	1 	1		5	
Totals	308	82	103	3	1	2	10	4	3	5	7	3	_	11	2	1	1	5	4	5	40	6	2	1	5	2



TABLE 15

THORPE ISOLATION HOSPITAL

Admissions under Parishes. .

	Blackhall	Easington	Hutton Henry	Haswell	Hawthorn	Horden	Murton	Shotton	South Hetton	Thornley	Trimdon Station	Wheatley Hill	Wingate	Seaham	Totals
Scarlet Fever Diphtheria Diphtheria Carriers Enteric Group of Fevers Dysentery Measles Rubella Mumps Epidemic Cerebro Spinal Meningitis Other Forms of Meningitis Poliomyelitis Encephalitis Lethargica Pneumonia Bronchitis Influenza Other Respiratory Diseases Erysipelas Skin and Septic Conditions Puerperal Pyrexia Tonsillitis Other Gastro Intestinal Diseases General Diseases Injuries Vincents Angina Unclassified	2 4 	11 10 			1	5 25 2 - - 1 - 2 1 - - - 1 - - - - 1 - - - -	6 23 — — — — — — — — — — — — — — — — — —	2 4	3 4 1 — — — — — — — — — — — — — — — — — —	1 1 2 2 - 1 1 - 1 1 1 1 1 1 1 1 1 1 1 1	7 	2	8 3 — — — — — — — — — — — — — — — — — —	34 29 — 2 — 1 — 1 — 1 — 1 — 6 — — 1 — 1 — 1 — 1 —	82 103 3 1 2 10 4 3 5 7 3
Totals	9	38	3	3	5	44	47	12	18	15	12	5	17	80	308



The severe shortage of labour and material has again limited structural work to essential maintenance. The air raid shelter was, however, converted for storage purposes, and the "blast walls" were removed, thus greatly improving the lighting and ventilation of the wards.

A food trolley for the conveyance of meals from the kitchen to the wards was purchased, and a refrigerator was installed. Both these acquisitions have proved most useful.

The position as regards nursing and domestic staff has again been reasonably satisfactory, considering the general shortage of both these types of personnel, but an increased proportion of trained nurses is desirable.

Mrs. G. Harrop resigned from the post of Matron in November and was succeeded by Miss D. Green.

LABORATORY WORK.

Under the arrangement with the County Council an increased number of specimens was sent to the Joint Committee's Public Health Laboratory at King's College, Newcastle, but the small laboratory established at the hospital was in constant use for the examination of urgent specimens.

SECTION IV.

DIPHTHERIA IMMUNISATION,

The Council's diphtheria immunisation scheme, which provides free immunisation against diphtheria up to the age of 15 years, has operated during the year.

Since the practice of active immunisation takes place throughout the year the population of immunised children during the year is not the total who had been treated by the end of the year, for those immunised during the later months formed part of the non-immunised population during the earlier months.

The following figures are therefore calculated on the relative risks in terms of child-years spent in the immunised and non-immunised groups:—

Total population of children un Easington Rural District e mid-year	stimated	l as livi	ing at	21802
Immunised children at risk on	47			11000
Number immunised before Ja	inuary 1	st, 1945		11922
Number immunised:—				
January 1st to June 30th			432	
Three-quarters thereof		• •		324
July 1st to December 31st			511	
One-quarter thereof				128
Total child-years at risk for im-	munised			12374
Non-immunised children; tot			t risk	
. 1100			• •	9428

The following tables show (a) the total number of children in the district who have been immunised since the commencement of the scheme in 1942, and (b) the number of children finally diagnosed as suffering from diphtheria during the year and the number of deaths, divided into those who had been immunised and those who had not, and into age groups 0—1, 1—5, 5—10, 10—15 years.

Table of Diphtheria Inoculations

Age at date of inoculation	1942	1943	1944	1945	Ratio of inoculated to total population at the end of 1945.
Under 1 year	18	84	254	181	Total under 5 years
1+	180	393	698	495	of age 3,217 being
2+	156	154	354	93	44.9% of the
3+	188	183	246	33	population of this
4 +	239	189	244	34	age.
5+	245	132	196	43	
6+	252	361	144	16	
7+.	314	270	79	19	Total 5—14 years
8+	960	323	84	7	of age 9,648 being
9+	872	192	104	6	66.1% of the
10 +	869	226	87	9	population of this
11+	902	228	178	5	age.
12+	819	298	123	2	
13+	—	59	17		
14 +		_	8		
15 +				_	
Total	6014	3092	2816	943	



Number of cases included in preceding column in which the child had completed a full course of immunisation		1			
No. of Deaths		_	_	1	÷ı
Age at date of death	0 — 1	<u>.</u>	ñ —10	61—01	
Number of cases included in preceding column in which the child had completed a full course of immunisation		+	∞	∞	50
Number of cases diagnosed as suffering from diphtheria		1-	30	11	65
Age at date of Notification	- O		5 — 10	10—15	

SECTION V.

TUBERCULOSIS

TABLE 16.

Number of Cases on Register at 31st December, 1945.

	PULMONARY.		NON	NON-PULMONARY.		TOTAL
Male Fer	Female	Total	Male	Female	Total	CASES
189	174	363	206	218	424	787

TABLE 17.

TUBERCULOSIS—New Cases and Mortality, 1945.

			NEW (CASES			DE	DEATHS	
Age Periods		Pulmonary	nary	Non-Pu	Non-Pulmonary	Pulm	Pulmonary	Non-Pu	Non-Pulmonary
	1	Male	Female	Male	Female	Male	Female	Male	Female
Under 1			D.S.						
1 . to 2	i			The state of the s				The state of the s	
			_	??	٠١				
3 - 4	•			—	ξĊ		1		_
				1	_		1		
	:		_	9	,C			-	parad
10 - 15	:		_	9	10		1	0	
15 — 20	* * *	9	-	ಞ	∵ 1	$\hat{\gamma}$ 1		i	_
20 — 35	* * * * * * * * * * * * * * * * * * * *	10	14	-	+	10	X	1	
35 — 45	:	O :	-	_		٠١	+		
45 — 65	:	+	5	_	?!	**	-	٦ı	
65 and upwards	:	1					_		
		67	66	26	5.7	1	18		

BACTERIOLOGICAL EXAMINATIONS DURING 1945.

Negative	13.37
Positive	28
Total	255
	Phthisis

TABLE 18.

COMPARATIVE TABLE RE TUBERCULOSIS STATISTICS FOR RECENT YEARS.

1	1		1									
YEAR	onary	e Total	836	238	261	302	323	357	419	436	444	424
OF	Non-Pulmonary	Female	90+	911	135	148	169	185	217	558	53 53 53	$\frac{51}{\infty}$
AT END	Non	Male	430	÷ 1	129	154	154	172	202	208	211	206
on Register	ľy	Total	430	183	180	192	197	21	260	307	348	363
ON RE	Pulmonary	Female	215	833	21 ∞	+1	+	88	113	140	165	174
No.	P.	Male	215	\$6.	& Q.	$\frac{1}{\infty}$	123	126	147	167	833	189
	nary	Total	16	Ιδ	21	6	1~	∞	5 .	15	1:	undige sur B
	Non-Pulmonary	Male Female Total		G.	L	्रा	ee.	्।	ee	7	1~	7
DEATHS	Non	Male	ũ	9	+	10	7	9	9	∞	ĵ	ĬĠ.
DEA		Total	36	67	51	35	?;	34	87	100	૽૽ૼ૽૽	35
	Pulmonary	Male Female	8	?1	+?	-	91	133	10	17	10	8
	Pu	Male 1	$\frac{1}{\infty}$	∞	1:	$\frac{1}{\infty}$	1.0	51	18	50	~	1-
	nary	Total	99	7.0	0.9	+1	53	57	11	97	ől	53
	Non-Pulmonary	Male Female	e # 6 # 6 # 6 # 6 # 6 # 6 # 6 # 6 # 6 #	30	50 50	34	34	66	36	821	56	21
ASES	Non-	Male]	34	31	0	0f	19	85 8	4]	18	55	26
NEW CASES	y.	Total	63	55	48	99	90	46	73	59	6.9	58
	Pulmonary	Male Female Total	34	ç: :	ei ei	94	17	ତ୍ରୀ ତୀ	35	30	37	50
	Pu	Male 1	66	35	56	42	99	24	38	53	32	6.7
		YEAR	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945

TABLE 19.

Deaths from Pulmonary Tuberculosis between the ages of 15 and 25 years, during the past 10 years.

Year	Male	Female	Total	Percentage of Total Pulmon- ary Deaths
1936	3	5)	8	14%
1937	5	5	1()	20%
1938	8	9	17	33%
1939	1	4	5	17%
1940	7	6	13	30%
1941	5	4	9	27%
1942	6	9	15	54%
1943	9	7	16	43 %
1944	1	4	5	21%
1945	;}	8	11	31%

TABLE 20.

TUBERCULOSIS.

The following Table shows the number of deaths from Tuberculosis (all ages) during the past five years—the figures in parenthesis indicating deaths occurring in previously notified cases of Tuberculosis.

YEAR]	PULMONA	RY	NON	-PULMON	ARY
I DAN	Male	Female	Total	Male	Female	Total
1941	21 (15)	13 (8)	34 (23)	6 (3)	2 (1)	8 (4)
1942	18 (14)	10 (-9)	28 (23)	6 (3)	3 ()	9 (3)
1943	20 (18)	17 (9)	37 (27)	8 (2)	4 (2)	12 (4)
1944	13 (-9)	10 (7)	23 (16)	5 (-)	7 (1)	12 (1)
1945	17 (13)	18 (13)	35 (26)	5 (3)	4 (3)	9 (6)
Total	89 (69)	68 (46)	157 (115)	30 (11)	20 (7)	50 (18)

TUBERCULOSIS.

Perusal of the foregoing tables will elicit the following facts:

The total number of new cases of the pulmonary form of the disease notified was 58, comprising 29 males and 29 females. This was a decrease of 11 from the figure for 1944 which was 69, made up of 32 males and 37 females.

New notifications of the non-pulmonary form of the disease numbered 53, an increase of 2 over the number for 1944.

The deaths from the pulmonary form of the disease showed an increase from 23 in 1944 to 35, while in the non-pulmonary form the number of deaths was 9, as against 12 in 1944.

The number of new cases among females in the 20 to 35 age group formed 32.1% of all new female cases.

The tuberculosis mortality rates for the district for 1945 were respectively 0.454 per 1,000 of the population for tuberculosis of the respiratory system, and 0.117 per 1,000 for the other tuberculosis diseases.

The figure for the death rate in the respiratory type of the disease should be compared with the figure of 0.519 per 1,000, the rate for England and Wales in 1945. The non-pulmonary death rate stands to be compared with the national rate for 1945 of 0.100.

SECTION VI.

SCABIES.

The clinic for the treatment of this disease has been in operation at Horden throughout the year. The building used was formerly a gas cleansing station and is far from ideal for purpose, but shortage of labour and material have prevented the carrying out of any adaptations or improvements. The Medical Officer of Health attends weekly to examine women and children referred to the clinic by School and Child Welfare Medical Officers and by General Practitioners. The treatment is carried out by a staff consisting of one trained nurse and two helpers. Adult male cases are examined by their own doctors and treated at Leeholme Hospital by a staff recruited from local ambulance workers.

This latter arrangement has not been found to be very satisfactory in practice and it is intended to centralise all the treatment at the Horden Clinic. By this means it is hoped to ensure the simultaneous treatment of all members of an infected family, failing which the treatment can at best be only palliative as re-infection is almost certain to follow.

The staff have carried out good work with the limited facilities available. The fares of all patients attending the clinic are refunded.

Statistics of the work carried out under the scheme during the year are as follows:—

No. of patients sum	moned for a	examinat	ion		370
No. of patients so from scabies		found to		()	224
No of patients t				ed of	197

SECTION VII.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

The water undertakings supplying the district are :—Sunderland and South Shields Water Company.
Horden Collieries Limited.
Wingate and District Water Company.
Wheatley Hill Colliery.
Easington Rural District Council.

The water supply, which is of a high standard of purity, has been satisfactory in quality but barely adequate in quantity to meet the needs of the district.

Six samples of water were sent for chemical and bacteriological examination, and the results of all were satisfactory.

A typical chemical analysis and bacteriological examination is as follows:—

Chemical Analysis.	Parts	per	100,000
Total Solids			52.7
Chlorine as Chloride			5.13
Chlorine expressed as Sodium Chloric	le		8.46
Nitrogen as Nitrates			0.17
Nitrogen as Nitrites			Nil.
Free Ammonia			0.0005
Albuminoid Ammonia			0.0015
Alkalinity			29.90
Total Hardness (degrees)			28.70
Colour (Hazen degrees)			Nil.
Suspended matter			Nil.
Iron			Nil.

Bacteriological Examination.

Organisms visible on 48 hours incubation a			2 per ce.
Coliform Organisms	l cc.	10 ce's.	100 cc's.
	nil.	nil.	nil.

With regard to plumbo-solvent action, no evidence has ever been found that this is present in any water used in this district, probably owing to the fact that all the water without exception, is from magnesium limestone and has a permanent and temporary hardness of 25—30°.

Particulars of the number of dwelling houses and the number of the population supplied from public water mains (a) direct to houses, (b) by means of stand-pipes, are given in the following table:—

	1	2	3	4	5	6
LOCALITY	Estimated population	Area in acres	Number of houses	No. of Houses with mains supply direct to houses	No. of Houses with mains supply from stand pipes	No. of Houses without mains supply
	. 109 . 323 . 68	1297 1392 500	24 127 15	166		
Castle Eden .	. 1518	1949	464	464		
Cold Hesledon Dalton-le-Dale .	. 1283	1030	287 243	433	97	
Easington with Thorpe	. 11640	4112	2907	2892	8	7
~	. 2980 . 3545	3390	735 908	1401	240	2
	. 585 2535	2016	161 656	701	113	3
Hawthorn .	. 263	1444	120	118		2)
TT 1 1	. 5692 1399	2630	1873 459	2247	85	
Murton East .	. 9079	1406	2490	1860	630	
NT 1 1:	. 144	2346 333	41		2	41
TT 1	. 6226 . 12753	4673	1737 3556	5292		1
Thornley	. 4455	1148	1204	1174	30	
Wheatley Hill	. 3279 6796 1923	4176	799 1655 467	2896	18	7
TOTALS	76990	34653	20930	19644	1223	63

CLOST ACCOMMODATION.

The number of sanitary conveniences in the district are:

Waterclosets	 23,287
Ash Closets	 148
Privy Middens	 103
Pan Closets	 74

There have been no conversions from privies to water-closets during the year.

HOUSING, ETC.

(Contributed by the Engineer & Surveyor).

SEWERS.

The sewerage system for the district was given the usual careful attention and maintenance during the year and repairs carried out where necessary. The length of the new sewers laid was insignificant compared with pre-war years, being confined to local improvement works on branch sewers.

HOUSING.

At the termination of hostilities the necessary drawing office work on new housing schemes was well advanced, and a very early commencement on the erection of new houses was possible. The house type designs had been completed and approved early in 1945, the type plans being among the first to be approved by the Ministry of Health; this being largely due to an anticipation of the requirements of the Dudley Report and the Ministry of Health's Housing Manual. The high standard of the design and the provision of fittings and equipment not normally found in Council Houses has been the subject of favourable comment both within and outside the district.

Field work and the preparation of layouts had all been completed and approved by the middle of 1945, and the work of constructing roads and sewers commenced early in the autumn of that year. The technique of layout design was thoroughly considered in the early stages in view of the modern trend in planning, with the result that the new sites incorporate ample playing field facilities, open spaces, shops where necessary, and the planting of trees and shrubs is included as an integral part of the site development.

The Council's area was one of the first in the Northern Region to be allocated a supply of temporary Prefabricated Houses and work of erection began in the middle of 1945 on 100 'Phoenix' bungalows on the Horden Park Estate. Approximately 50 of these houses had been completed and tenanted by the end of 1945.

A comparison between temporary houses and traditional houses is not out of place at this stage and, whilst the general opinion of the tenants in the temporary houses is that the accommodation is good, this, to some extent, may be influenced by the relief felt by such tenants in securing a "home" All the "features" of the temporary house are incorporated in the Council's traditional house and many more besides, including "soft water on tap," aerial and earth installation for radio built in, drying cupboard with facilities for rapid drying of clothes, tradesmen's cupboard, and many others successfully tested and demonstrated before inclusion in the specification. With regard to the important point of maintenance it is too early to comment on the repairs due to usage which the temporary houses will require, but it can be stated that from the structural point of view the cost of maintaining such houses will be considerably more than that required That the temporary house programme for traditional houses. sponsored by the Government is having an effect on the erection of traditional houses is undeniable, since priority of supply of materials and fittings common to both types is in favour of temporary houses.

The maintenance of some 4,711 Council houses continued during 1945 despite severe difficulties with regard to materials. Especially difficult was the supply of replacement back boilers and ranges, paint and rainwater goods, and many houses in the district are still without eaves gutters consequent upon the damage done by the heavy snowstorm of 1941.

WATER SUPPLY.

The supply position in the Council's area, covered as it is by five different undertakings, continued satisfactory during the year. With particular reference to the Council's area of supply considerable waste of water was experienced due to defective fittings on the consumers' side, and this had to receive special attention in order to avoid a major threat to the general supply.

PUBLIC CLEANSING

(Contributed by the Cleansing Superintendent).

PUBLIC CLEANSING.

The cleansing and disposal of refuse, etc., is carried out by the Cleansing Department for the whole of the rural area, which service has been in operation as a central department since October, 1932.

The vehicles used for cleansing work in this area are five Morris Refuse Collectors, four S & D Freighters and two Karrier Bantams which are engaged full time, in addition there are twenty-two horsedrawn vehicles. All vehicles for cleansing are provided with iron sliding covers which are not only a protection against the spilling of the refuse, but are also a prevention against any dust nuisance.

The disposal of all refuse is semi-contrlled, this being done in layers as far as possible which is an additional precaution

against fire occurring.

Since the end of April 1940, the Cleansing Department has been responsible for the salvage of paper, metals, rags and bones, etc., and records to date prove that by the amounts disposed of the collection of salvage has been successful.

SECTION VIII.

REPORT OF THE SENIOR SANITARY INSPECTOR.
To the Medical Officer of Health.

Sir, I have pleasure in submitting a report of the work carried out by my section of the department during the year 1945.

The following table shows the principal nuisances dealt

with during the year:

PUBLIC HEALTH ACTS.

NT - 4 C NT		No.	Notices	Served	Nuisances
Nature of Nuisance		$ \begin{array}{c} \text{of} \\ \text{Visits} \end{array} $	Informal	Formal	Abated
Foul Conditions		123	18		13
Structural Defects		162	57	- Transp	21
Ashpits & Privies		15	entig		1
Deposits of Refuse and					
Manure		88	24	2	18
	•		34		37
Defective Yard Paving .		20	2	No resolvings	1
House Drainage—					
Defective Traps		34	8		5
			40	and a second second	23
Water Supply (Defective					
		84	26		14
Animals improperly kept			5	M-10.	7
Smoke Nuisances .			1	and the second second	
				Market con cong	1
Rat Infested Premises .			4		4
Dustbins			48	2	40
Public Halls & Cinemas .			3		2
Licenced Premises			3	,	7
Verminous Premises—					
Council Houses .		89	6		3
T) · TT		67	10		7
Infectious Diseases					
Enquiries		455		-	
Infectious Diseases	1				
Disinfections		365			
Thanks Wana & Shada		3		**************************************	2
,				•	
		0105	000	4	200
		2185	289	4	206

Schools.

All the schools in the district have been inspected with regard to closet accommodation and washing facilities and were found to be satisfactory. It was not necessary to close any schools for infectious diseases.

SMOKE ABATEMENT.

War time control of spoilbanks was still enforced and we had no complaints during the year.

MOVABLE DWELLINGS.

No applications were received for licences to occupy huts, caravans, etc.

VERMINOUS PREMISES.

28 houses were disinfested for the presence of bed-bugs, of these 20 were Council Houses and 8 private dwellings. A charge for time and materials was made in the case of all private dwellings.

DISINFECTION OF PREMISES AND PERSONS.

455 visits and re-visits were made to houses in cases of infectious diseases, and the number of disinfections carried out during the year is as follows:—

Scarlet Fever			118
Diphtheria			112
Meningitis			18
Erysipelas	• •		
Chicken Pox			
Tuberculosis			100
Cancer	• •		4
Diarrhoea		• •	2
Bronchitis	• •		1
Para-typhoid Measles			3
Poliomyelitis		• •	1 A
1 onomy entis	• •	• •	

LICENSED PREMISES, CLUBS, ETC.

- 151 inspections of public houses and clubs were made.
 - 3 informal notices were served to occupiers.
 - 7 outstanding notices were complied with.

CINEMAS AND PUBLIC HALLS.

71 inspections were made with regard to heating, lighting, ventilation and closet accommodation.

365

- 3 informal notices were served to occupiers.
- 2 outstanding notices were complied with.

RODENT CONTROL.

The initial treatment of the sewers for the disinfestation of rats was completed in April and it was estimated that 14,885 rats were destroyed. When it is considered that a rat will eat roughly one pound of food per day, if it is available, and contaminate many times this amount, it will be appreciated the tremendous waste of food caused by rats, and how worth while the effort to destroy as many as possible. This of course is in addition to the serious amount of damage to fabrics and structures caused by rats.

The first maintenance treatment was completed in July, and the result, seen below, proves how necessary it is to carry out regular maintenance treatment of the sewers each year.

Complaints from business premises and private dwellings were many and varied. All complaints were investigated and many proved to be frivolous and a waste of time for the Rodent Officer.

Full powers under the Rats and Mice (Destruction) Act, 1919 were delegated to us by the County Council at the beginning of the year, and we have made full use of the powers. The whole of the district was surveyed by the Rodent Officer and all premises where evidence of rats was found were disinfested.

SEWERS

	Manholes Baited	Estimated number of rats destroyed	Approximate Cost	Recovered by Grant	Nett cost to Council
Initial Treatment	5773	14885	01213	8083	2023
Maintenance Treatment		1590	8153	6013	1013
Total	6736	16475	£1723	£163	£811

LANDS AND PREMISES

		Number dealt with	Degrec of Infestation	No. of Baiting Points	Estimated No. of rats destroyed	Approx- imate cost	Recovered from Occupier or Min. of Food	Nett cost to Council
Council Tips Council Sewage Works	: :	+	2 major 2 minor		9 7	€ (1) (1) (2) (3)		\$\frac{1}{2}
Business Premises Private Dwellings	: :	€ 9	l major 2 minor 1 major 45 minor	116	306	2 8 663	2 8 663	Ę.
Total	•		4 major 49 minor	174	662	£121 11 3	2 8 663	8 5 553

Housing.

No new houses were built during the year, but many houses, both prefabricated and traditional are well on the way to completion.

81 vacant Council houses were inspected and of these 20 were found to be verminous.

OVERCROWDING.

115 applications for Council houses were received with allegations of overcrowding. All were investigated and recorded and in most cases the conditions were brought to the notice of the local housing committee.

Inspections under Circular 2871 regarding building work were carried out, but further efforts were made by the Ministry of Health and the Ministry of Works to prevent labour and building material being expended on non-essential work. To this end they circularised all local authorities in August, stipulating that no building work costing over £10 was to be carried out without a building licence. As each application has to be investigated, this meant a great deal of extra work. Up to the 31st December, 127 applications for building licences were investigated, entailing 170 inspections.

The volume of work in respect to complaints of housing defects and insanitary conditions continues to increase, mainly due to the fact that property has deteriorated so much during the war years, owing to lack of facilities and material for repairs. Even at this stage, labour and material are so scarce that only the minimum of essential repairs can be carried out.

Inspections under the Housing Act 1936 are as follows:—

Number of visits and revisits	 743
Number of informal notices served	 132
Number of statutory notices served	1
Number of notices complied with	 67

FACTORY ACT, 1937.

Regular inspection of all premises controlled by this act has been maintained, principally with regard to sanitary accommodation, heating, lighting, ventilation, cleanliness, etc.

Three notices drawing our attention to insanitary conditions have been received during the year from His Majesty's Inspector of Factories. The requisite notices to remedy these defects were served and complied with.

One new factory, a small printing works, was added to the list of factories. The following table gives particulars of factory inspections, etc.

Premises	Number on Register	Inspect-		Occupiers Prosecuted
Factories— With Mechanical Power Without do. do. Bakehouses Workplaces		234	1!)	None
Total	122	234	19	

SHOPS АСТ, 1934.

Regular inspections of all shops premises were carried out principally with regard to the enforcement of sufficient sanitary accommodation, lighting, heating, ventilation and washing facilities.

208 inspections were made, and 6 infringements of the act were found and dealt with.

SUPERVISION OF FOOD SUPPLIES.

INSPECTION OF MEAT AND OTHER FOODS.

MEAT :-

The year 1945 has seen the completion of five years of centralised slaughtering, and now after the termination of hostilities no sign appears even of modification of the system much less of its abandonment in favour of pre-war methods. I am aware that its inception, in all probability, came from the urgency of war rather than the adoption of improved Public Health principles, a fact which, in itself, is not without irony.

The pros and contras of any discussion on the subject of centralised slaughtering are generally well enough known and I am not disposed to dwell on the matter except to indicate by reference my awareness of obvious criticisms which in the main, come from established businesses. Carcases are, admittedly, subject to additional handling and present transport arrangements are far from ideal, whilst pre-war years saw a great deal of unsound meat and offal destroyed without the local authority being "bothered."

I prefer that what is unsound and offered for destruction should still be under control. Only in this way can it be properly utilised in industry. What to me is decisive is the fact that under the old system *some* unsound meat and offal *did pass* to the public. A small amount probably still does. Human fallibility and incomplete knowledge of the cause of some animal disease render such a possibility likely. However in pre-war years I claim much more must have been passed on to the public.

With a total of 14,246 there was a decrease of 672 in the number of animals slaughtered at the Station Town Co-operative Abattoir during the year as compared with 1944. Although fewer animals were slaughtered the work of inspection was heavier in as much as larger killings of cattle, calves and pigs took place, all of which require eareful examination, whilst 1,192 fewer sheep, which are comparatively immune to disease, were dealt with.

Difficulties consequent on heavy slaughterings, arrangements for the disposal of unsound meat and the collection and utilisation of glands continue on the same general lines, described in greater detail in previous reports.

This year, as always, tuberculosis in food animals is responsible for greater loss than all other causes combined, whilst the fluke infected pastures of Ireland result in the appropriate organs of Irish store cattle pursuing their accustomed journey to the "condemned" hut rather than the dinner-table.

Amongst other diseases, Johnes' disease is frequently encountered but has little significance except in advanced cases, whilst mastitis continues to be a scourge amongst dairy stock and is responsible for many cows being brought into the abattoir as casualties.

I continue the practice of giving figures of stock slaughtered, evidence of disease, and comparative totals of condemnations in past years in tabular form for convenience.

	Cattle excluding	Cows	Calves	Sheep	Pigs
Number Slaughtered at Government Controlled Abattoir	2957 plus 42 Casualties	640 plus 105 Reject & Casualties 1 T.B. Order	629 plus 74 Casualties	9376 plus 86 Casualties	296 plus 40 Casualties
Number Slaughtered under private license				ç1	969
Whole Carcases condemned (T.B. only)	2 plus 2 Casualties	4 plus 9 Reject & Casualties 1 T.B. Order	l plus 2 ('asualities		l Casuality
Carcases of which some part or organ condemned (T.B. only)	603	~	+		9
Percentage of number inspected affected with T.B.	16.11%	0/	0.57%		%87.1
Carcases condemned. (All diseases excluding T.B.)	2 Casualties	6 Casualties	l Casualty	8 plus 2 Casualties	
Careases of which some part or organ condemned. (All conditions excluding T.B.)	458		6.0	30	+
Percentage of number inspected affected with disease other than T.B.	12.23%	0	0.43%	0.32%	1.19%

SUMMARY OF MEAT AND OTHER FOODS CONDEMNED DURING YEAR ENDING 31st DECEMBER, 1945.

	CATTLE.	Sts.	lbs.	
4	Carcases Cow Beef	141	12	Generalised T.B.
	All organs and offal	39	*)	Tuberculosis.
	Both fores Cow Beef	22	6	Tuberculosis.
	Part fore Cow Beef	2	1.1	Tuberculosis.
	One middle Cow Beef	5	12	Tuberculosis.
	Both thin flanks Cow Beef	3	5	Tuberculosis.
	Both thin flanks Cow Beef	•)	5	Tuberculosis.
	Both fores Cow Beef	20	4	Tuberculosis.
	Both fores Cow Beef	20	13	Tuberculosis.
	Both fores Cow Beef	19	2	Tuberculosis.
	Both fores Cow Beef	19		Tuberculosis.
	One fore Cow Beef	()	13	Tuberculosis.
	One fore Cow Beef	10	()	Tuberculosis.
	Part fore Cow Beef	I.	()	Tuberculosis.
•)	Carcases Cow Beef (reject)	58	8	Generalised T.B.
	All organs and offal	17	Ö	Tuberculosis.
	Both fores and middles (reject)		2	Tuberculosis.
	One fore Cow Beef (reject)	8	.5	Tuberculosis.
	Both fores Cow Beef (reject)	11	9	Tuberculosis.
	Both hinds Cow Beef (reject)	16	11	Tuberculosis.
	Flank and loin trimmings (reject)		2	Tuberculosis.
3	Carcases Cow Beef (Casualty)	90	8	Generalised T.B.
•)	All organs and offal	32		Tuberculosis.
4	Carcases Cow Beef (Casualty)	100	$\overline{6}$	Tuberculosis,
-1	All organs and offal		O	dropsy and
	All organs and offar	•) •)	O	emaciation.
	One side Cow Beef (Casualty)	20	•)	Tuberculosis.
	Organs and Offal	7		Tuberculosis.
	Both fores Cow Beef (Cas.)	14		Tuberculosis.
	Part fore Cow Beef (Cas.)	2	10	Tuberculosis.
1	Carcase Cow Beef (T.B. Order)		ł	Generalised T.B.
,	All organs and offal	14	13	Tuberculosis.
]	Carcase Heifer Beef	39		Generalised T.B.
'	All organs and offal	10		Tuberculosis.
	One fore Heifer Beef	11	10	Tuberculosis.
	One fore Heifer Beef	12		Tuberculosis.
	One flank and part fore Heifer	2	4	Tuberculosis.
	Part both fores Heifer	$\frac{2}{2}$		Tuberculosis.
	Part middle Heifer	2		Tuberculosis.
	Two thin flanks Heifer	*)	4.	Tuberculosis.
• • •	Carcases Heifer Beef (Casualty)		5	Generalised T.B.
	All organs and offal	13	8	Tuberculosis.
	One side Heifer Beef (Casualty)		8	Tuberculosis.
	Organs and offal	8	0	Tuberculosis.
	organis and ona	O	()	TUNCTURIONIS.

			Sts.	lbs.	
1	Carcase Bullock Beef		37	12	Generalised T.B.
1.	All organs and offal		11	6	Tuberculosis.
	Both fores Bullock Beef		25	9	Tuberculosis.
	One side Bull (Casualty)		10		Tuberculosis.
	One fore Bull (Casualty)		4		Tuberculosis.
	Organs and offal		5		Tuberculosis.
	Part hind Bullock		2	11	Bone-Taint.
	Part fore Bullock		Ī	()	Bone-Taint.
	Part hind		ì	$9\frac{1}{2}$	Bone-taint.
2	Carcases Cow Beef (reject)	• •	53	8	Dropsy and
-	All organs and offal		16	8	Emaciation
			• ''		(1 Nephritis.)
1	Carcase Cow Beef (Casualty)	25	13	Dropsy and
•	Organs and offal		7	12	Emaciation
					(Pericarditis).
•)	Carcases Cow Beef (Casualty	V)	44	6	Johnes disease
	Organs and offal		15	12	with Emaciation.
]	Carcase Cow Beef (Casualty)		33	11	Septic peri-
	Organs and offal		8	4.	carditis.
	Both fores Cow Beef (Casua			13	Extensive septic
	`	,	,		adhesions.
	Part Leg Cow (Casualty)]	7	Large Abscess
	Part fore Cow Beef			13	Large Abscess.
	Part fore Cow Beef		1]	Bruising and
					Congestion.
1	Carcase Heifer Beef (Casual	tv)	17	7	Pathological
	Organs and offal		7	()	Emaciation
					(Pneumonia).
1	Carcase Heifer Beef (Casualt	(i,i)	14	7	Pyaemia.
	Organs and offal		4	4	do.
	Both hinds Heifer Beef (Cas	:.)	20	6	Extensive and
					severe bruising
					and congestion
					following injury.
130	Beastheads and tongues		309	4	Tuberculosis.
10	Beastheads and tongues		23	()	Actinomycosis.
10	Beast tongues		2	12	Actinomycosis.
582	Beast lungs		454	6	Tuberculosis.
425	Beast lungs		326	1()	Cysts, Aspira-
1) 4.6	D 4 1'		(2.)()	1.0	tion, etc.
340	Beasts livers and pieces		620		Cirrhosis.
193	Beast livers		186	10	T.B. Abscesses,
				•	Cysts, Bacterial
	Classification Description of Control		1) 1 (*	1	Necrosis.
	Sundry Beast offal		316]	T.B. Mastitis,
					Johnes disease,
					ete.

1 Carcase Calf	CALV	ES.		Sts.	lbs.	
2 Carcases Calves (Casualties) Organs and offal One Calf pluck (Casualty) Both fores Calf (Casualty) Organs and offal Organs and offal Organs and offal Organs and offal Both fores Eamb (Casualty) I 12 Heads and plucks Fores, middles, legs Lamb I4 Casualties Fores, middles, legs Lamb One fore Lamb (Casualty) Organs and offal	1	Carcase Calf		6	9	Generalised T.B.
Organs and offal				1		do.
1 Carcase Calf (Casualty) Organs and offal Organs and offal One Calf pluck (Casualty) Both fores Calf (Casualty) Two heads and plucks 1 3 Tuberculosis. Both fores Calf (Casualty) Two heads and plucks 1 3 Decomposition. Sheep. 6 Carcases Lamb Organs and offal Organs and offal Organs and offal 2 Carcases Lamb Organs and plucks Tores, middles, legs Lamb 14 Casualties Tores, middles, legs Lamb 14 Casualties Tores (Casualty) One fore Lamb (Casualty) Organs and offal Organs of Tuberculosis. One fore Pork Organs and Organs one congestion. Organs one fore Pork Organs of Tuberculosis.	•)				3	Generalised T.B.
Organs and offal						
One Calf pluck (Casualty) 4 Tuberculosis. Both fores Calf (Casualty) 1 4 Abseess contamination. SHEEP. 6 Carcases Lamb 23 4 Decomposition. Organs and offal 5 8 do. 2 Carcases Lamb (Casualty) 1 12 do. Heads and plucks 10 do. Fores, middles, legs Lamb 14 Casualties 7 4 Bruising and Congestion. Both fores Ewe (Casualty) 1 11 Septic Adhesions. One fore Lamb (Casualty) 1 3 do. Sundry Sheep offal 3 9 Abseesses, Cysts and Cirrhosis. Ptgs. 1 Carcase Sow Pig (Casualty) 16 5 Generalised T.B. Organs and offal 1 5 do. Carcase Sow Pig 30 10 Decomposition. Organs and offal 1 4 do. Pig Heads 5 13 Tuberculosis. One fore Pork 2 0 Severe bruising and Congestion. Part leg Pork (Casualty) 11 Bruising and Congestion. Two pig plucks 1 0 Tuberculosis.						•
One Calf pluck (Casualty)		Organs and offal		0	13	•
Both fores Calf (Casualty) 1 4 Abscess contam- Two heads and plucks 1 3 ination. SHEEP. 6 Carcases Lamb 23 4 Decomposition. Organs and offal 5 8 do. 2 Carcases Lamb 3 13 Dropsy and Emaciation. 2 Carcases Lamb (Casualty) 1 12 do. Heads and plucks 10 do. Fores, middles, legs Lamb 14 Casualties 7 4 Bruising and Congestion. Both fores Ewe (Casualty) 1 11 Septic Adhesions. One fore Lamb (Casualty) 1 3 do. Sundry Sheep offal 3 9 Abscesses, Cysts and Cirrhosis. PIGS. 1 Carcase Sow Pig (Casualty) 16 5 Generalised T.B. Organs and offal 1 5 do. 1 Carcase Sow Pig 30 10 Decomposition. Organs and offal 1 4 do. 3 Pig Heads 5 13 Tuberculosis. One fore Pork 2 0 Severe bruising and congestion. Part leg Pork (Casualty) 11 Bruising and Congestion. Two pig plucks 1 0 Tuberculosis.		One Colf while (Consulter)			1	
Two heads and plucks				1		
Sheep. 6 Carcases Lamb				1		
6 Carcases Lamb		Tho heads and paters	• •	,	0	macion.
Organs and offal	SHEE	Р.				
Organs and offal	6	Carcases Lamb		2:3	4	Decomposition.
Carcases Lamb (Casualty)		Organs and offal				
2 Carcases Lamb (Casualty)	•)	Carcases Lamb		3	13	Dropsy and
Heads and plucks						Emaciation.
Fores, middles, legs Lamb 14 Casualties	2			1		
Pigs. 1 Carcase Sow Pig (Casualty) 1 3 do. Congestion. 1 Carcase Sow Pig (Casualty) 1 5 do. Corgans and offal 1 4 do. Corgans and congestion. Corgans and congestion. Corgans and congestion. Corgans and congestion. Corgans and Corgans					10	(1().
Both fores Ewe (Casualty) 1 11 Septic Adhesions. One fore Lamb (Casualty) 1 3 do. Sundry Sheep offal					,	TD ' ' 1
Both fores Ewe (Casualty)		14 Casualties	• •	1	4	*
One fore Lamb (Casualty)		Poth found Eve (Consulty)		1	1.1	
Sundry Sheep offal		· ·		I		
Pigs. 1 Carcase Sow Pig (Casualty) . 16 5 Generalised T.B. Organs and offal . 1 5 do. 1 Carcase Sow Pig . 30 10 Decomposition. Organs and offal . 1 4 do. 3 Pig Heads 5 13 Tuberculosis. One fore Pork . 2 0 Severe bruising and congestion. Part leg Pork (Casualty) . 11 Bruising and Congestion. Two pig plucks 1 0 Tuberculosis.				•}		
1 Carcase Sow Pig (Casualty)		randi, meep ara		• /	• /	•
1 Carcase Sow Pig (Casualty)	Draw					
Organs and offal				1.0	~	Carray Barat W. D
1 Carcase Sow Pig 30 10 Decomposition. Organs and offal 1 4 do. 3 Pig Heads 5 13 Tuberculosis. One fore Pork 2 0 Severe bruising and congestion. Part leg Pork (Casualty) II Bruising and Congestion. Two pig plucks 1 0 Tuberculosis.	1					
Organs and offal	1	· ·				
3 Pig Heads	'					•
One fore Pork 2 0 Severe bruising and congestion. Part leg Pork (Casualty) II Bruising and Congestion. Two pig plucks 1 0 Tuberculosis.	3					
Part leg Pork (Casualty) II Bruising and Congestion. Two pig plucks I 0 Tuberculosis.	* /					
Part leg Pork (Casualty) II Bruising and Congestion. Two pig plucks I 0 Tuberculosis.				_		
Two pig plucks 1 0 Tuberculosis.		Part leg Pork (Casualty)			11	
Two pig plucks 1 0 Tuberculosis.		, , ,				
		Two pig plucks		1	()	
					7	Congestion.

 $3747 4\frac{1}{2}$

TINNED FOODS AND GENERAL PROVISIONS.

			Sts.	lbs.	
	Parings Corned Beef			7	Staining
345	Tins Corned Beef		69	12 \	
390	Tins Meat Products		48	$8\frac{1}{4}$	
332	Tins Vegetable Products		27	31	Decomposition
345	Tins Fish Products		14	$2\frac{4}{3}$	due to blown '
134	Tins Milk		8	$8\frac{1}{4}$	or damaged tins.
3	Tins Fruit			3	
57	Tins & Jars Preserves		6	4	
	Quantity Rice		7	2	Spoilt by water.
	Quantity Tea			12	Spoilt by water.
	Quantity Dried Fruit		14	5	Ferment & Mould
	Quantity Bacon & Ham		3	$9\frac{1}{4}$	Decomposition.
	Quantity Margarine		2		Rancidity
	Quantity Butter		52		Rancidity.
	Quantity Cheese		4	$11\frac{1}{2}$	Mould.
	Quantity Sugar		2	$(1)\frac{3}{4}$	Dampness
					contamination.
	Quantity Lard		()	()	Penetrating
					stain and mould.
	Sundry Provisions (Flour,				
	Lentils)		47	$8\frac{3}{4}$	Dampness,
					Decomposition.
	Quantity Fish		24	7	Decomposition.
	Total—Tinned Foods, etc.		342	6	
	Total—Meat, etc	3	747	$4\frac{1}{2}$	
	(1)		0.00		
	Total Weight	4	089	$10\frac{1}{2}$	
		-			

25 Tons, 11 Cwts. I St. $10\frac{1}{2}$ Ibs.

YEAR ENDING 31st DECEMBER.	WEIGHT	OF MEA	T ETC., CON-
1935 1936 1937 1938 1939 1940 1941 1942 1943	 Tons. 	3 Cwts. 13 Cwts. 1 Cwt. 6 Cwts. 1 Cwt. 12 Cwts. 3 Cwts. 12 Cwts.	1 St. 8 lbs. 2 Sts. 12 lbs. 1 St. 1 lb. 6 Sts. 3 lbs. 5 Sts. 13 lbs. 5 Sts. 0 lbs. 5 Sts. 2 lbs. 4 Sts. 7 lbs. 4 Sts. 6\frac{3}{4} lbs. 4 Sts. 1\frac{1}{4} lbs.
1945	25 Tons,	11 Cwts.	1 St. $10\frac{1}{2}$ lbs.

Public Health (Meat) Regulations, 1924.

Vehicles used for the transport of meat from the Abattoir have been regularly inspected and maintained in a clean condition.

SLAUGHTER OF ANIMALS ACT, 1933.

No new licence to slaughter animals was issued during the year and two licences were renewed. Conditions at the Abattoir are still congested and it is with great difficulty that the prevention of cruelty regulations are complied with.

DISEASES OF ANIMALS ACT, 1894-1909.

It was not necessary to notify any cases of Swine Fever, Anthrax, etc., under this Act and none were received from the Police.

Tuberculosis Order, 1938.

One cow was sent to the Abattoir under the terms of the above Order. Post-mortem examination showed the disease to be in an advanced stage and the carcase was condemned with all organs and offal.

There is little doubt that more cows would be sent in for slaughter under the T.B. Order except that experienced farmers send in such animals on their own behalf, as casualties, thereby anticipating veterinary action since the disease has often been demonstrated in advanced degree in such animals with udder lesions existing.

OTHER FOODS.

Strict supervision of all food premises has been continued and bearing in mind that many foodstuffs, such as milk, ice cream, meat pies, etc., are ideal vehicles for the propagation of certain infectious diseases, it will be appreciated that regular inspection must be maintained, with special attention to cleanliness and personal hygiene of the staff employed.

With regard to provisions, canned foods, etc., it will be seen from the foregoing table that 342 stones 6 lbs. were condemned. There is an increase of 178 stones over 1944 which has entailed considerably more work when it is remembered that every article must be inspected. A large proportion of the unsound canned foods was again caused by perforated cans due to faulty packing and careless handling during transport.

Most food stuffs are still under control of the Ministry of Food and condemned food can only be replaced on the production of the Sanitary Inspector's certificate. • All quantities of fats, butter, cheese and bacon are returned to wholesalers for possible salvage and processing.

FOOD AND DRUGS ACT, 1938.

Restaurant Kitchens (including British Restaurants, Cafes, etc.)

All these premises are visited frequently and advice given to enable the occupier to prepare the food under hygienic conditions. Items needing attention at the British Restaurants are brought to the notice of the Accountant and the Surveyor.

HAWKERS CARTS AND VANS.

All vehicles carrying foodstuffs, including bakers' vans, meat vans and carts, hawkers' carts, etc., are stopped periodically and inspected.

FRIED FISH SHOPS.

Regular inspection of fish shops was maintained and in several cases alterations and improvements were carried out, principally by the alteration of the provision of new preparation rooms. There is no change in the number of fried fish shops on the register.

MANUFACTURE AND SALE OF ICE CREAM.

Section 14 of the Food and Drugs Act, 1938 compels the registration of all ice cream manufacturers, vendors and premises. During the year two applications for registration were received. After investigation, these were considered by the Health Committee and the applications granted.

The premises are all visited regularly and a very high standard of cleanliness is enforced. Generally the ice cream is produced in a very hygienic manner and it is rarely necessary to draw the attention of an occupier to any infringement of the act.

Premises		Number of Inspections		
Fish Shops	54	183	5	
Butchers' Shops	50	142	5	
Ice Cream Shops	16	184		
Restaurant Kitchens	-	76	4	Aggreening consuming
Other Food Premises		360	17	
Totals —	120	945	31	

MILK SUPPLY.

Strict supervision and inspection of the production, distribution and sale of all milk is still carried out.

All farms where milk is produced and all retail purveyors' premises are visited regularly.

MILK EXAMINATION.

183 samples of whole and pasteurised milk were taken and sent to King's College and Sunderland Royal Infirmary for examination during 1945, and the following results were obtained:

(a) Methylene Blue Test.	Blue	Test	·	(b) B	(b) Bacillus Coli Test	li Test	Tot Pho (P	Total Count and Phosphatase Test (Pasteurised)	and Test 1)	Biolo Tu	Biological Test for Tuberculosis	ت
Satis- satis- fact- fact- ory ory	Un sat fac or	y X	% Un- satis- fact- ory	Satis- fact- ory	Un- satis- fact- ory	% Un- satis- fact- ory	Satis- fact- ory	Un- satis- fact- ory	% Un- satis- fact- ory	Nega- tive	Posi- tive	% Posi- tive
118	÷1 &		19%	<u> </u>	56	17.6%				† †	e = = = = = = = = = = = = = = = = = = =	2.08%
34	रा		5.5%	36	೧೦	8.300	<u></u>	**	9.7%			. 1

MILK (SPECIAL DESIGNATIONS) ORDERS, 1936-44.

The number of persons licenced to produce, bottle or sell designated milk is as follows:—

	Tuberculin Tested	Aceredited	Pasteurised	Total
Wholesale Producers	2	10	ı	13
Retail Producers	2	8	G malifordhoods	1()
Bottler Retailers	-		I	1
Retailers			17	17
Total -	.4	18	19	41

Samples of milk are taken at the farm where it is produced and at the dairies of retail purveyors and sent to either the Public Health Laboratory, Newcastle, or the Royal Infirmary, Sunderland to be tested. The tests carried out are Methylene Blue test, B. Coli., and Tubercle Bacilli, for raw milk and the total count and Phosphatase test for pasteurised milk. Three samples of milk showed the presence of tubercle bacilli and the results were sent to the County Medical Officer. The farms were promptly visited by a veterinary inspector who took a series of samples from each herd. On two farms the results showed negative, but this can be explained by the fact that the farms in each case disposed of an animal before the veterinary inspector took the samples. In the third case, the result was positive and the guilty cow was sent to the abattoir for slaughter. On post mortem examination by the meat inspector, it was found to be infected with generalised tuberculosis and was condemned.

Strict supervision of the East Durham Co-operative Dairies' pasteurisation establishment still continues and generally considering war conditions and shortage of labour, the plant is managed in a satisfactory manner.

The new pasteurisation plant installed last year is working satisfactorily and is proving much more efficient than the old one. The new plant is the High Temperature Short Time type. Results of samples have been given on the previous page.

Many complaints of sour milk were received and investigated. Some were due to lack of proper precautions on the part of the consumer, others due to the milk being delivered at the end

of the round with the consequent exposure during warm weather, and lastly, some retailers are compelled to buy a supplementary supply of milk outside the district which in many cases has been a long time in transit and consequently is of a poor keeping quality.

3 applications were received from farmers to be registered as cowkeepers and 2 to have their premises registered as dairies and after consideration by the Health Committee were granted.

One application to be registered as a retail purveyor was granted.

	Number Registered	Inspections		Occupiers Prosecuted
Producers	120	324	45	der , berker blann in jou agent completion of the com-
Retail Purveyors	13	95	·)	l

In conclusion I would like to record my appreciation of your guidance during the year, and the loyal co-operation of the staff in the efficient discharge of their duties.

I am, Sir,

Your obedient servant,

J. SAVAGE.

Senior Sanitary Inspector.

